

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 09-717143		Filing Date 11-15-04		
							Applicant(s)				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	
1	1						51				
2	1						52				
3		1					53				
4							54				
5	1						55				
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45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	7						Total Indep				
Total Depend	1						Total Depend				
Total Claims	8						Total Claims				